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Transmission Date: 12 May 2008 Docket: 1054-003

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Reply to Non-Final Office Action - Restriction Requirement (3 sheets)

Fee Transmittal Form (PTO/SB/17) (1 sheet)

Application Number 10/532,404
Confirmation No.: 9131
Filing Date: 22 April 2005
Document Submission Date: 12 May 2008

Art Unit: 3751
Examiner: Maust, Timothy Lewis
Inventor: Merrill, William
Docket: 1054-003

12 May 2008

Date

Kelly B. Smoker

Name of Certifier

Kelly B. Smoker

Signature of Certifier

Approved for use through 06/30/2010. OMB U651-UU32

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/03/2004.
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).**FEE TRANSMITTAL
For FY 2008** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **60.00****Complete If Known**

Application Number	10/532,404
Filing Date	22 April 2005
First Named Inventor	Merrill, William
Examiner Name	Maust, Timothy Lewis
Art Unit	3751
Attorney Docket No.	1054-003

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METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: **50-2504** Deposit Account Name: **Michael N. Haynes**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small EntityFee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

210 105

Multiple dependent claims

370 185

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	0	x 25	= 0

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
	0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	0	x 105	= 0

Fee (\$)	Fee Paid (\$)
	0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =		/ 50 = 0 (round up to a whole number)	x 130	= 0

Fee Paid (\$)

0

Fee Paid (\$)

60

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)

Other First Month Extension

SUBMITTED BY

Signature

*Michael N. Haynes*Registration No.
(Attorney/Agent)

Telephone

Name (Print/Type)

Date **12 May 2008**

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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